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PTO/SB/21 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

 Application Number
 10/601,949

 Filing Date
 06-23-2003

 First Named Inventor
 Stephen Blauer

 Art Unit
 3765

 Examiner Name
 Hoey

 Attorney Docket Number
 blaum40520

Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC |X|Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information** After Final **Provisional Application** Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request Return Post Carl Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Altman & Martin Signature

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Signature Geald Oltman

Typed or printed name

Printed name

Date

Gerald Altman

Date

17,109

0/31/2005

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PTO/SB/17 (12-04)
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Under the Paperwork Reduction Act of Effective on 12		Complete if Known		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL		Application Number	10/601,949	
FEE IKAN	19MIIIAL	Filing Date	06/23/2003	
For FY 2005		First Named Inventor	Stephen Blauer	
Appliant daims small autitus		Examiner Name	Ноеу	
Applicant claims small entity s	Talus, See 37 CFR 1.27	Art Unit	3765	
OTAL AMOUNT OF PAYMENT	(\$) 200	Attorney Docket No.	blaum40520	

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METHOD OF PAYMEN	IT (check al	l that apply)						
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FEE CALCULATION	1011710-2030							
1. BASIC FILING, SEA	RCH AND	FXAMINATI	ON FEES				-	
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Application Type	Fee (\$)	Small Entity Fee (\$)	<u>S</u> Fee (\$)	mall Entity Fee (\$)	<u>Fee (\$)</u>	mall Entity Fee (\$)	Fees Paid	(\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE. Fee Description Each claim over 20 or, f Each independent claim Multiple dependent claim	for Reissues over 3 or, f						Fee (\$) 50	nall Entity Fee (\$) 25 100 180
Total Claims	Extra Claim			1 (\$)		pendent Claim		
9 - 20 or HP = HP = highest number of total	0 I claims paid for	x 25	=0		<u>Fee (\$)</u>	<u>Fee Pa</u>	<u>id (\$)</u>	
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3. APPLICATION SIZE  If the specification and for each additional  Total Sheets  - 100 =	FEE d drawings	exceed 100 s	heets of paper, ereof. See 35 t mber of each a	J.S.C. 41(a)	)(1)(G) and 3	7 CFR 1.16(s) preof Fee (s	). 5) <u>Fee Pa</u>	
4. OTHER FEE(S)	• ,•	100 6					Fees I	<u> Paid (\$)</u>
Non-English Specif	ication, \$1	130 fee (no s	mall entity disc	count)				
Other:								

SUBMITTED BY				
Signature	Geald Oltman	Registration No. (Attorney/Agent)	17,109	Telephone 617-523-3515
Name (Print/Type)				Date 10/31/2005

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